

Employment Application

Please fill out accurately and as completely as possible. Incomplete applications will not be accepted.								
APPLICANT INFORMATION								
Last Name			First Name		M.I.	SS#		
Street Address								
Town/City				State		Zip code		
Phone Number	()		Email Address					
Alternate Number	()		Emergency Contact		Phone Number			
Position Applied for			E. Contact Address		,		Relationship:	
	permanent resident alien o work in the U.S.?	YES 🗆	NO □		worked or volunteered for sin the past?		YES 🗆	NO □
Can you, after employme to work i	nt, verify your legal right n the U.S.?	YES 🗆	NO □	If so, when?	_		1	
Are you at 18 \	Years or Older?	YES 🗆	NO □	Available Dates:		то		
How many total hours p	er week are you seeking?		Are you willing to work:			undays 🗌 He	olidays 🗌 Eve	nings
Do you hold a valid dr	iver's license? 🔲 YES	□NO	IF YES, STAT	E OF ISSUE DRIVER'S LICENSE #				
Have you ever been convicted of a crime (other then minor traffic violations) in the last 5 years? YES NO If yes, please explain on a separate sheet of paper. Please note that a conviction is not an automatic disqualifier of employment. Wilful omission or misrepresentation is however, a basis for employment ineligibility.								
EDUCATION								
High School			Address					
Dates Attended:	то		DEGREE/CERT		Special Courses:			
College/University			Address					
Dates Attended:	ТО		DEGREE/CERT		Special Courses:			
College/University			Address					
Dates Attended:	ТО		DEGREE/CERT		Special Courses:			
SKILLS								
COMPUTER SKILLS:								
FOREIGN LANGUAGE (SPEAK, READ AND/OR WRITE) SKILLS: ENGLISH SPANISH FRENCH SIGN LANGUAGE OTHER 1:								
OTHER CERTIFICATES, INTERNSHIPS, TRAINING OR SKILLS:								
PUBLIC SPEAKING EXPERIENCE/SKILLS:								
ARE YOU CPR/FIRST AID CERTIFIED? NOTE: WHILE THIS IS NOT REQUIRED, IT IS HIGHLY RECOMMENDED FOR ADMISSIONS STAFF								

REFERENCES										
Please list 3 professional & personal references (family members are excluded) who have known you for at least 1 year. Letters of Recommendation accepted. Make sure to inform references about potential contact by employer.										
Full Name						Title/Position				
Company					Phone #	()		Years Know		
Address						Email Address				
Full Name					Title/Position	_				
Company					Phone #	()		Years Know		
Address						Email Address				
Full Name						Title/Position	n			
Company					Phone #	()		Years Know		
Address						Email Address				
PREVIOUS EMPLOYMENT										
1 Company					Phone Number	()				
Address					Supervisor					
Position		Starting Salary				Final Salary				
Responsibilities:							Hours per week			
From	То		Reason for Leaving							
May we contact you	ur previous supervisor for a reference?		YES 🔲	NO 🔲	If not, why?					
2 Company	7			Phone Number	r ()					
Address					Supervisor					
Job Title		Starting Salary		Starting Salary			Final Salary			
Responsibilities:			ı		Hours pe		urs per week			
From	То		Reason for Leaving							
May we contact you	your previous supervisor for a reference?		YES 🔲	NO 🔲	If not, why?					
3 Company				Phone Number	()					
Address					Supervisor					
Job Title	Starting Salary					Final Salary				
Responsibilities:							Hours per week			
From	То		Reason for Leaving							
May we contact you	ay we contact your previous supervisor for a reference?			NO 🔲	If not, why?					
FOR ADDITIONAL HISTORY, PLEASE ATTACH COMPLETED RESUME										

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I HAVE READ AND UNDERSTAND THE NATURE OF THE POSITION I AM APPLYING FOR AND THE DUTIES ASSOCIATED WITH IT AND IF HIRED, I ATTEST THAT I CAN PERFORM THE REQUIRED FUNCTIONS AND DUTIES OF MY JOB TO THE BEST OF MY ABILITIES, WITH OR WITHOUT REASONABLE ACCOMODATION.

□YES □NO

DISCLAIMER AND SIGNATURE:

Please read and sign the following statement: I certify, under penalty of law, that the information given in this application is correct and complete to the best of my knowledge. I am aware that, should investigation at any time show falsification, I will not be considered for employment or, if employed, I may be dismissed. I hereby authorize the Maine State Aquarium and agencies with whom my name is certified/referred to make all necessary investigations concerning me, my work habits, previous employment or experience, and other situations as are applicable to the position I am applying for. I authorize the Maine State Aquarium to check my driving record if the position for which I am applying requires driving. I authorize the Maine State Aquarium to receive and make available to other relevant agencies my academic records or other materials, pertinent to my qualifications, and further authorize and request each former employer, persons given as reference, educational institutions, or organizations (including law enforcement agencies) to provide all information that may be sought in connection with my application. With this permission I release the organization from any liability as a result of such contact. Finally, I understand and agree that I will be required to ratify the information contained in this application by signature as a condition of employment.

Signature	Date	

Please submit your completed application, with appropriate copies of verification materials (*transcripts, certifications, education & training documentation, diplomas, etc., as applicable*) to:

Maine State Aquarium ATTN: Aimee Hayden-Roderiques RE: Employment Application PO BOX 8 West Boothbay Harbor, ME 04575

If you have any further questions, please contact me at (207) 633-9542.

Good luck!

Aimee Hayden-Roderiques
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